FORM D 9분은 Mail Processing Section

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UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

110.100	<u> </u>
OMB APPF	ROVAL
OMB Number: 3	235-0076
Expires: April 30,	2008
Estimated average bu	ırden
nours per response:	16.00

SEC USE ONLY

DATE RECEIVED

Serial

Prefix

					DDOCESS
Name of Offering (check if this is an ame					LUOCE TO
Goldman Sachs Investment Partners					
Filing Under (Check box(es) that apply):	☐ Rule 504	☐ Rule 505	☑ Rule 506	☐ Section 4(6)	LI ULOE JAN 2 5 200
Type of Filing: ☑ New Filing ☐ Amer				···	THOM: si av
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1. Enter the information requested about the	e issuer				1 (10400)
Name of Issuer (check if this is an ame	endment and nam	e has changed, and	l indicate change.	.)	
Goldman Sachs Investment Partners	Manager Emplo	yee Fund, L.P.			
Address of Executive Offices	(Number and S	treet, City, State, 2	Zip Code)	Telephone Numi	ber (including Area Code)
One New York Plaza, New York, New	York 10004	•		(212) 902-10	900
Address of Principal Business Operations (if different from Executive Offices)	(Number and	Street, City, State	, Zip Code)	Telephone Num	ber (Including Area Code)
Brief Description of Business					
To operate as a private investmen	t fund.				
Type of Business Organization					
corporation	☑ limited	partnership, alrea	iv formed	Oother (plea	
□ business trust		partnership, to be		4	08022249
-		Month	Year		
Actual or Estimated Date of Incorporation of	r Organization:	1 1	0 7	☑ Actual	☐ Estimated
Jurisdiction of Incorporation or Organizatio	n: (Enter ty	vo-letter U.S. Post	al Service abbrev	iation for	
		N for Canada; FN	for other foreign j	urisdiction)	D E
GENERAL INSTRUCTIONS	.				
Federal:					
Who Must File: All issuers making an offering of	of securities in relia	ince on an exemption	n under Regulation	D or Section 4(6), 17	7 CFR 230.501 et seq. or 15 U.S.C.
77d(6). When To File: A notice must be filed no later t	han 15 days after t	he first sale of secu	rities in the offerin	g. A notice is deeme	d filed with the U.S. Securities and
Exchange Commission (SEC) on the earlier of the					

Filing Fee: There is no federal filing fee.

due, on the date it was mailed by United States registered or certified mail to that address.

photocopies of the manually signed copy or bear typed or printed signatures.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

State

with the SEC.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collections of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

A. BASIC IDENTIFICATION DATA
2. Enter the information requested for the following:
 Each promoter of the issuer, if the issuer has been organized within the past five years;
 Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 Each executive officer and Director of corporate issuers and of corporate general and managing partners of partnership issuers; and
Each general and managing partner of partnership issuers.
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual) Goldman, Sachs & Co.
Business or Residence Address (Number and Street, City, State, Zip Code) 85 Broad Street, New York, NY 10004
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☑ General and/or. Managing Partner
Full Name (Last name first, if individual) Goldman Sachs Investment Partners GP, LLC
Business or Residence Address (Number and Street, City, State, Zip Code) One New York Plaza, New York, NY 10004
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer* ☐ Director ☐ General Partner and/o * of the Issuer's General Partner ☐ Managing Partner
Full Name (Last name first, if individual) Agus, Raanan
Business or Residence Address (Number and Street, City, State, Zip Code) One New York Plaza, New York, NY 10004
Check Box(es) that Apply: □ Promoter □ Beneficial Owner □ Executive Officer* □ Director □ General Partner and/o * of the Issuer's General Partner Managing Partner
Full Name (Last name first, if individual) Eberts, Kenneth
Business or Residence Address (Number and Street, City, State, Zip Code) One New York Plaza, New York, NY 10004
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer* Director General Partner and/of the Issuer's General Partner Managing Partner
Full Name (Last name first, if individual) Barone, Michelle
Business or Residence Address (Number and Street, City, State, Zip Code) One New York Plaza, New York, NY 10004
Check Box(es) that Apply: ☐ Promoter ☑ Beneficial Owner ☑ Executive Officer* ☐ Director ☐ General Partner and/ * of the Issuer's General Partner Managing Partner
Full Name (Last name first, if individual) Bhandari, Gaurav
Business or Residence Address (Number and Street, City, State, Zip Code) One New York Plaza, New York, NY 10004
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer* Director General Partner and/or
Full Name (Last name first, if individual) Alptuna, Umit
Business or Residence Address (Number and Street, City, State, Zip Code) One New York Plaza, New York, NY 10004
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General Partner and/or Managing Partner
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)

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						<u> </u>					Yes	No
1. Has the	. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? Answer also in Appendix, Column 2, if filing under ULOE.								Ø			
			Α	nswer also	in Appendix	x, Column 2	2, if filing u	nder ULOE	•			
2. What is	the minimum	investment (that will be ac	cepted from	any individu	al?					\$ 25	000#
Subject to the sole discretion of the General Partner to accept lesser amounts.								25,000				
											Yes ⊠	No
	ne offering p											-
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.												
Full Name	(Last name	first, if indi	ividual)									
Goldman.	Sachs & C	'0-										
Business o	r Residence	Address (N	lumber and	Street, City	, State, Zip	Code)						
			40004									
	Street, New ssociated B							<u> </u>		 		
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•	All States"									[GA]	(HI)	(ID)
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[IL]	[IN]	[A]	[KS]	[KY]	(LA)	(ME) (NY)	[MD] [NC]	[MA] [ND]	[OH]	[OK]	[MS]	[PA]
[TM]	[NE]	[NV]	[NH]	[NJ]	(NM)	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
[RI]	[SC] (Last name	[SD]	[NT]	[TX]	[UT]	[1 1]	[VA]	[11,11]	11111	[, , , ,]		
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				0 0.	Grana Wa	Codo		 				
Business o	or Residence	e Address (f	number and	Street, City	y, State, Zip	Code						
Name of A	Associated E	Broker or De	ealer		 -			•				
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Business (or Residence	e Address (I	Number and	Street, Cit	y, State, Zip	Code						
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Name of A	Associated I	Broker or D	ealer									
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[IL]	[IN]	[IA]	[KS]	(KY)	[LA]	[ME]	[MD]	[MA]	[MI]	[MN] [OK]	[MS] [OR]	(PA)
[MT]	(NE)	[NV]	[NH]	[NJ]	(NM)	[NY]	[NC] [VA]	[ND] [WA]	(OH) [WV]	[WI]	[WY]	[PR]
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(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\Pi\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.					
	Type of Security		Aggregate Offering Price	:		Amount Already Sold
	Debt	\$_	0		\$_	0
	Equity	\$	0		\$	0
	□ Common □ Preferred		-		_	
	Convertible Securities (including warrants)	\$	0		\$	0
	Partnership Interests.				\$	0
	Other (Specify) Limted Partnership Units	_		_	\$	28,700,000
	Total				\$	28,700,000
	Answer also in Appendix, Column 3, if filing under ULOE.	*-	20,700,000		*-	20,700,000
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Number			Aggregate Dollar Amount
			Investors			of Purchases
	Accredited Investors	_	11		\$_	28,700,000
	Non-accredited Investors	_	0		\$_	0
	Total (for filings under Rule 504 only)	_	N/A		\$_	N/A
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.		Type of			Dollar Amount
	Type of offering		Security			Sold
	Rule 505	_	N/A		\$_	N/A
	Regulation A	_	N/A		\$_	N/A
	Rule 504	_	N/A		\$_	N/A
	Total	_	N/A		\$_	N/A
ti ti	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of the expenditure is not known, furnish an estimate and check the box to the left of the estimate.					
	Transfer Agent's Fees				\$_	0
	Printing and Engraving Costs				\$_	0
	Legal Fees				\$_	0
	Accounting Fees				\$_	0
	Engineering Fees				\$_	0
	Sales Commissions (specify finders' fees separately)				\$	0
	Other Expenses (identify) legal and miscellaneous				\$	0
	Total				\$	0
	*All expenses in connection with this offering are paid by Goldman Sachs and therefore the expenses will not lessen the amount of proceeds available for use.				_	

	C. OFFERING PRICE, N	UMBER OF INVESTORS, EXP	<u> ENS</u>	ES A	and use of Pi	KULE	ED9	100			
	 b. Enter the difference between the aggreg- - Question 1 and total expenses furnished difference is the "adjusted gross proceeds to 	in response to Part C - Question 4.a	. Thi	is		\$_		28,700,000			
5.	Indicate below the amount of the adjusted g to be used for each of the purposes shown. furnish an estimate and check the box to payments listed must equal the adjusted growth to Part C - Question 4.b. above.	If the amount for any purpose is not to the left of the estimate. The total	known of th	լ, e							
					Payments to Officers, Directors, & Affiliates			Payments To Others			
	Salaries and Fees			\$_	0		\$_	0			
	Purchase of real estate			\$_	0	. 🗆	s _	0			
	Purchase, rental or leasing and installation o	of machinery and equipment		\$_	0		\$_	0			
	Construction or leasing of plant buildings an	nd facilities		\$_	0	_ 🗖	\$ _	0			
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)				0	_	\$	0			
	Repayment of indebtedness			\$	0		\$	0			
	Working capital			\$	0		s _	0			
	Other (specify): Investment capital			\$_	0	Ø	\$_	28,700,000			
	Column Totals			\$_	0	. 🗆	s _	28,700,000			
Total Payments Listed (column totals added)								28,700,000			
		D. FEDERAL SIGNATU	RE								
fo	The issuer has duly caused this notice to be sollowing signature constitutes an undertaking s staff, the information furnished by the issuer	by the issuer to furnish to the U.S. Sec	urities	and	Exchange Commis	sion, u					
Gol	uer (Print or Type) Idman Sachs Investment Partners unager Employee Fund, L.P.	Signature XX			Date January 16, 200	08					
Naı	me of Signer (Print or Type)	Title of Signer (Print of Type)			•						
Jac	Jacqueline Gigantes Assistant Secretary of the Issuer's General Partner										

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001).

